TENNESSEE GENERAL ASSEMBLY FISCAL REVIEW COMMITTEE



FISCAL NOTE

HB 2348 - SB 2674

February 15, 2018

SUMMARY OF BILL: Requires a health care prescriber, when prescribing more than a five-day supply of opioids to a non-pregnant fertile woman, to inform the patient of the risk of fetal injury and neonatal abstinence syndrome in the event of pregnancy while on therapy. Encourages prescribers to recommend and assist the patient in obtaining voluntary long-acting reversible contraception as a primary method of contraception. Further encourages prescribers to advise the patient to use a secondary method of contraception and if pregnancy does occur during treatment, to minimize fetal exposure as much as possible. Requires prescribers to document any counseling and the patient's reproductive life plan in the patient's medical record.

ESTIMATED FISCAL IMPACT:

NOT SIGNIFICANT

Assumptions:

- Based on information provided by the Department of Health (DOH), the proposed legislation will not have a significant impact on the DOH or the Division of Health Related Boards programs or operations; therefore, any fiscal impact is estimated to be not significant.
- Pursuant to Tenn. Code Ann. § 4-29-121, all health related boards are required to be self-supporting over a two-year period. The Division of Health Related Boards had an annual surplus of \$4,526,956 in FY15-16, an annual surplus of \$3,551,254 in FY16-17, and a cumulative reserve balance of \$32,645,083 on June 30, 2017.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.

Krista M. Lee, Executive Director

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